



Study to Assess Physical Health Status of Children at Selected Orphanage in Salem, Chennai – India

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Introduction

Orphanages are a vulnerable group in any socio-economic setting simply because they are deprived of one or both of their primary care givers. The level of vulnerability they face however increases significantly with the level of poverty. In India below 18's population is 42,06,78,000 among them 2,57,00,000 are orphan children. That constitute a major part of the below 18's population (UNICEF, 2005). Orphans are a group of underprivileged population in society. The evidence from the pediatric and child psychiatry literature makes clear that orphanages are neither an effective nor a humane mode of assistance to infants and families. Orphans are some of the most underprivileged children in the world. With few exceptions, children without parents are deprived of many of the basic rights such as food, shelter, education, and a family environment. Orphanage children are deprived of their primary care givers thus more prone to physical health problems. Being a nurse, investigator felt the need of undergoing this project. It is felt that the Knowledge will help and motivate the nurse in providing health care to the children.

Statement of Problem

A study to assess physical health status of the children between the age group of 5 to 14 years, residing at selected orphanage in Salem, Chennai – India.

Objective

The objective of this text study is to assess the physical health status of orphanage children.

Conceptual Framework

It is conceptualized that variables act on the health status of orphanage children .The observations are made through observational checklist. Extraneous variable age, sex, education and religion affect the physical status of the orphanage children, that is assess by height, weight, general appearance, scalp, hair, face, mouth, abdomen, extremities, skin, vitamin deficiencies, drug addiction, chronic disease & height and weight.

Literature Survey

Children who live in orphanage unfortunately suffer from malnutrition and environmental deprivation of varying degrees. These combined deficiencies can lead to serious vitamin deficiencies can lead to serious, but easily reversible medical complications if they are recognized in a timely fashion. Children with this deficiency are at risk for suffering from severe anemia and developmental delays. Orphan children do not receive proper physical and emotional care because they are unaccompanied, displaced, and lacking family support. If this phenomenon is continued unchecked, it still highly affects the country's development. Solutions of this problem have different dimensions. The welfare of children is the concern and responsibility of all. It is necessary to work together with all social factors in order to achieve the common goals of children for the survival and development in a consistent and coordinated manner (Rudolf, K.1999).

Orphans suffer more vulnerability than non-orphans in terms of education (Grassly, 2003). The children who have become orphans lose emotional and financial support. They must often work to cover essential needs of themselves (Dougnon, D.2004).

Methodology

The present study is descriptive cross-sectional survey design. This study was conducted at selected orphanage in Salem, Tamil Nadu. The orphanage is situated near by the commissioner's office at Mulwadi Gate, Salem. All the children who were in between the age group of 5 to 14 years of selected orphanage were the population for the study. All the children between the age group of 5 to 14 years who were living in selected orphanage. Sample was selected by using purposive sampling technique.

Tool

- Structured interview schedule to collect demographic data.
- Observational check list
- Weighing machine
- Height scale

Validity of tool was checked by observational checklist and interview schedule was sent to the experts in field of pediatrics and social preventive medicine. Reliability of tool was tested by implementing the tool on ten children in Chinnaseeragapadi village samples by test-retest and intra-rated method. Pilot study was conducted in Chinnaseeragapadi village on school Children were age group of 5-14 year. Observational checklist was used for "head to foot" examination.

Data Analysis and interpretation

Section – A

Table 1: Distribution of orphanage children to their demographic characteristics

S. No.	Demographic Variables		Percentage
1.	Age in Years	5 – 6	14.5
2.		7 – 8	12.5
3.		9 – 10	23
4.		11 – 12	21
5.		13 – 14	29
6.	Sex	Male	42.3
7.		Female	57.7
8.	Education	No education	14.5
9.		Primary education	49
10.		Secondary education	36.5
11.	Religion	Hindu	87.5
12.		Christian	12.5
13.	Period of stay in orphan	Less than 1 year	38.5
14.		1 – 2 years	20
15.		3 – 4 years	26
16.		5 – 6 years	13.5
17.		More than 6 years	2

Section- B

Table 2: Distribution of orphanage children to their physical characteristics

S. No.	Content	Percentage
1.	Vision Test	Myopia
2.		Hypermetropia
3.		Squint eye
4.	General appearance	Hygiene look present
5.	Skin	Patches
6.		Rashes
7.		Infected wound
8.	Scalp	Dandruff
9.		Pediculosis
10.		Infection
11.	Hair	Normal black hair
12.		Depigmentation
13.		Alopecia
14.	Face	Patches
15.		Puffiness
16.	Eyes	Blindness
17.		Bigots' spot
18.	Mouth	Dental caries
19.		Bleeding gum
20.		Gingivitis
21.		Stomatitis
22.		Halitosis
23.		Glositis
24.	Abdomen	Protruded abdomen

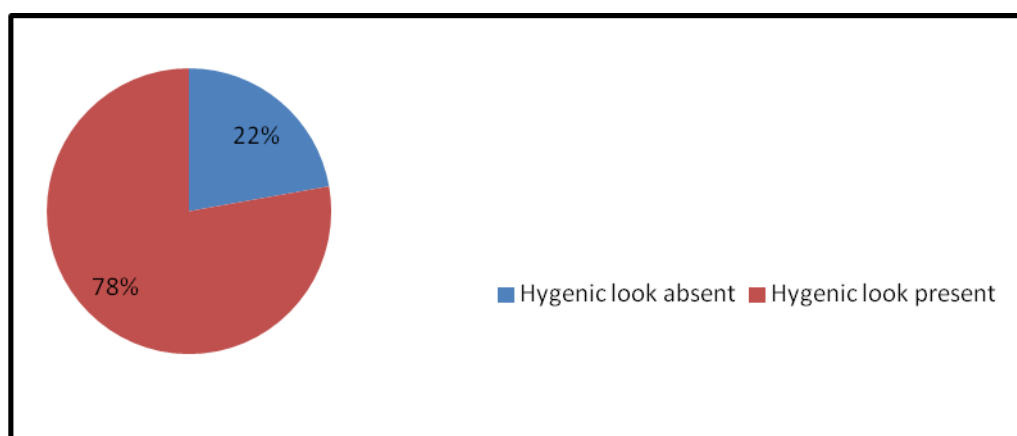


Figure 1: Distribution of orphanage children showing hygienic appearance

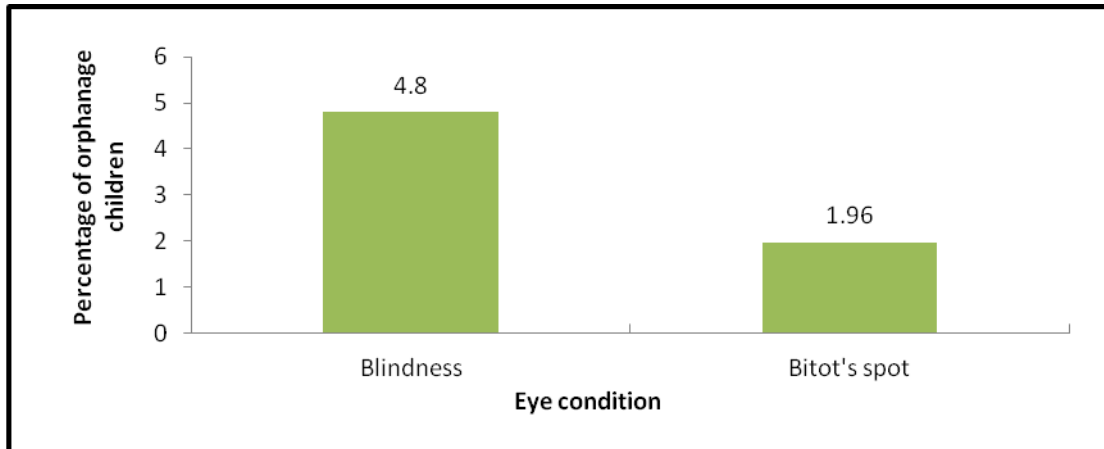


Figure 2: Distribution of orphanage children according to eye condition

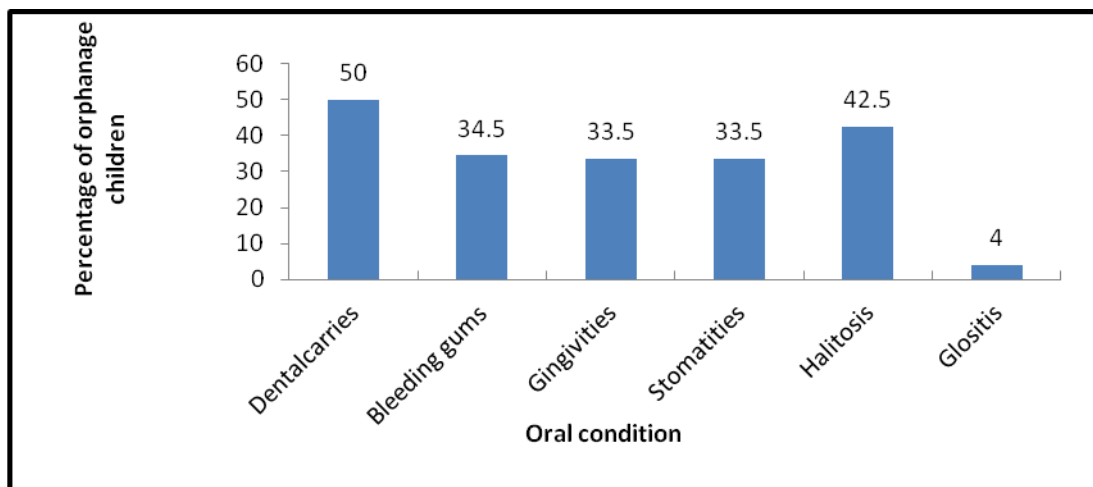


Figure 3: Distribution of orphanage children according to oral condition

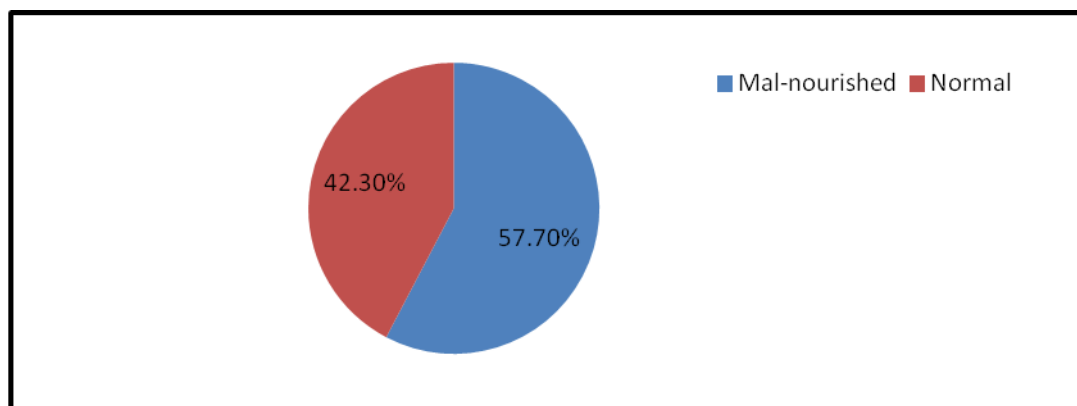


Figure 4: Distribution of orphanage children according to nutritional level

Conclusion

Orphanage children according to their age group shows that out of 104 children, highest percentage of children (29%) of them was between the age group of 13 –14 years and lowest percentage (12.50%) of them were between age group of 7-8 years.

Orphanage children skin problems shows that 3.84% of them had skin patches, 1.96% of them had skin rashes, 7.70% of them had infected wound and 3.84% of them had other skin problems. Most of the (83%) children had dandruff, 25% of them had pediculosis. children's has 4.8% blindness and only 1.96% of them had Bitot's spot. Orphanage children show that 50% of them had dental carries, 33.50 of them had gingivitis and 4% of them had glosistis. Orphanage children show that 57.70% of them were malnourished. Dandruff and pediculosis are most common in children. Mouth conditions are very poor in orphanage, mal nutrition is prevailing among orphan children.

Implications

Nursing services

- Periodic assessment of orphanage children's should be done.
- Camps should be conducted to educate the orphanage worker regarding importance of growth and development of child.
- Participate and provide services in rehabilitation program for the children who are affected.

Nursing education

- In-service training programs to health workers for detect and establish the health service for orphanage children.
- Workshops, seminar can be conducted at National, State and District level for health promotion of orphanage children.

Nursing research

- Comparative study to identify the nutritional status of orphanage and non-orphanage children.
- Studies need to be conducted on consequence of child development in orphanage.

Bibliography

- [1]. Al-malik (2006), "Prevalence of Dental Caries, Severity and Pattern in Age 6 to 7 years old Children in a Selected Institution in Saudi Arabia", Journal of Contemp Dent. Practice, 1; 7(2), Pp. 46 – 54
- [2]. Bhatia .V. et al., (1997), "Prevalence of Pediculosis Capitis among Children in a Rural community", Indian Journal of Maternal Child Health, 8(2), Pp. 39 – 41.
- [3]. Cenko .F. (2007), "A Child Health Promotion Intervention in Albulnia: Results Lessons Learned", Ig Santa Pubbl, 63(1), Pp. 7 – 20.
- [4]. Kweggir .A., (2007), www.global-children.org/programs-cambodia.html
- [5]. UNICEF, (2003), 'Nutrition – South Africa Humanitarian Crisis – Presentation at the UN/SADC Stakeholders Meeting", Johannesburg, pp 11 – 12.
- [6]. World Health Organization, (2005), the Management of Nutrition in Major Emergencies, 2nd edition, Geneva, Pp. 236.



Certificate of Recognition

This certificate is awarded to

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